22120 (8451 3, Form Approved OMB no. 2050-0039. Expires 9-90-49-x Please print or type. (Form designed for use on elite (12-pitch) typewriter. Manifest Document No. UNIFORM HAZARDOUS 1. Generator'S US EPA ID No. 2. Page 1 Information in the shaded areas is not required by Federal law. WASTE MANIFEST 45559 WADXX9249616 3. Generator's Name and Mailing Address A. State Manifest Document Number ASH GROVE CEMENT CO. SEATTLE 3801 E MARGINAL WAY SOUTH B. State Generator's ID 4. Generator's Phone SEATTILE MA 98104-0000 (206) 623-5596 ks Life, kir C. State Transporter's ID US EPA ID Number 5. Transporter 1 Company Name D. Transporter's Phone 253 385-3044 Burlington Bretrommiddal, Inc WARCCXXXXIT743 E. State Transporter's ID US EPA ID Number 7. Transporter 2 Company Name 8 F. Transporter's Phone G. State Facility's ID. 9. Designated Facility Name and Site Address US EPA ID Number 10. TURELINGTON ENVIRONMENTAL, THE KEND' 20245 27PH AVENUE SOUTH H. Facility's Phone REST. SE03P AW WAD991281767 (253) 872-8030 13. Total 12. Containers 14. Unit 11.US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) Waste No. Type No Quantity HM. MATERIAL NOT REGULATION BY NOT < <- \mathbb{G} DM 1 J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above a) SIR200-03 - ANTIFREEZE - FOR RECYCLE - PECHOE RECOR [1] 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national government regulations. If I am a large quantily generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good laith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed Typed Name Signature Month Day Year 40 17. Transporter 1 Acknowledgment of Receipt of Materials TRANSPORTER Printed/Typed Name Signature / Month Day Year 1 112 <018. Transporter 2 Acknowledgment of Receipt of Materials Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by المراة manifest except as noted in Item 19. Printed/Typed Name Signature (Mopin Day Form 6700-22 (Rev. 9-88) Previous editions are obsolete

***POR 24 HOUR EMERGENCY RESPONSE INFORMATION, CALL (253) 872-8030 ***



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